AUTHORIZATION AND RELEASE

I,	, born on	[birth
date], in	[birth city],	
[birth state],	Arizona, hereby consent to have an investiga	/], having filed an
	and fitness for the practice of law and such or	
	eported only to the admitting authority. I agree cerning my past record. I understand that I will	
	know the contents, and I further understand that	
**	e exceptions as noted in Rule 37(c), Rules of the	_
enforcement agency, court, association information pertaining to me, to furnish Examiners any such information, including a complaints filed against me, including a or closed, or any other pertinent data; Conference of Bar Examiners or any or documents, records or other information.		nts, records or other al Conference of Bar regarding charges or or informal, pending na and the National make copies of such
members, employees, and agents are in occurring in the performance of their qualifications, and licensing of person statements of opinion and other in communicated by any entity, include	caminations and the Committee on Character mmune from all civil liability for conduct at official duties relating to the examination, closs seeking to be admitted to the practice formation regarding an applicant for adming any person, firm, or institution, wither eyees or agents are privileged, and civil suits	nd communications haracter and fitness of law. Records, hission to the bar out malice, to the
I have read the foregoing document and complete and true of my own knowledge	d have answered all questions fully and frankle.	y. The answers are
State of		
) ss:	
County of	_)	
	Signature of Applicant	
Subscribed and sworn to before me this		
day of,	Year	
Notary Public		
My Commission Evnires		